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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Donald First name E Middle name Taylor Last name and Suffix (Sr., Jr., II, III)		Sheila First name M Middle name Taylor Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3014		xxx-xx-6052		

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Debtor 1
Debtor 2
Donald E Taylor
Sheila M Taylor

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	1706 Prairie Wind Drive Joliet, IL 60435 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code		
		Will	Trainesi, etiesi, etty, etate a zir eede		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	tor 1 tor 2	Donald E Taylor Sheila M Taylor	D	ocument	Page 3 of 56	Case number (if known)	
Part	2:	Tell the Court About	our Bankruptcy Case				
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief descr (Form 2010)). Also, go to the			oy 11 U.S.C. § 342(b) for Individuals Filing for Bani iate box.	kruptcy
	choc	sing to file under	Chapter 7				
			☐ Chapter 11				
			☐ Chapter 12				
			☐ Chapter 13				
8.	How	you will pay the fee	about how you may pay order. If your attorney is a pre-printed address.	y. Typically, if y s submitting you	ou are paying the fee ur payment on your be	eck with the clerk's office in your local court for mo yourself, you may pay with cash, cashier's check, ehalf, your attorney may pay with a credit card or o	or money check with
			☐ I need to pay the fee i The Filing Fee in Instal		,	otion, sign and attach the Application for Individual	s to Pay
			but is not required to, water applies to your family s	<i>r</i> aive your fee, a ize and you are	and may do so only if unable to pay the fee	ion only if you are filing for Chapter 7. By law, a ju your income is less than 150% of the official pove e in installments). If you choose this option, you mu fficial Form 103B) and file it with your petition.	rty line that
9.		you filed for	■ No.				
		inkruptcy within the st 8 years?	☐ Yes.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.		any bankruptcy s pending or being	■ No				
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.		ou rent your lence?	■ No. Go to line 12.				
	16910	ienoe :	☐ Yes. Has your landlor	d obtained an e	viction judgment agai	nst you and do you want to stay in your residence	?
			□ No Co to	line 12			

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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	tor 1 tor 2	Donald E Taylor Sheila M Taylor		Docum	Case number (if known)			
Part	3:	Report About Any Bu	sinesses `	You Own as a Sole Propri	etor			
12.	Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?							
			☐ Yes.	Name and location of bu	siness			
	busin an in sepa as a	e proprietorship is a less you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name of business, if any				
	If you sole page	have more than one proprietorship, use a rate sheet and attach		Number, Street, City, St				
	it to t	his petition.			ox to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				☐ None of the above	· · · · · · · · · · · · · · · · · · ·			
					•			
13.	Chap Bank	rou filing under oter 11 of the cruptcy Code and are a small business	deadlines operation	a are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).				
		definition of small	■ No.	I am not filing under Cha	apter 11.			
		ness debtor, see 11 C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
			☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4:	Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention			
14.	prop alleg of im	ou own or have any erty that poses or is ed to pose a threat minent and	■ No. □ Yes.	What is the hazard?				
	publi Or do prop	ifiable hazard to c health or safety? o you own any erty that needs ediate attention?		If immediate attention is needed, why is it needed?				
	peris livest or a l	xample, do you own hable goods, or ock that must be fed, building that needs nt repairs?		Where is the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Donald E Taylor
Sheila M Taylor
Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-14757 Doc 1 Filed 05/11/17 Entered 05/11/17 09:37:33 Desc Main Document Page 6 of 56

	tor 1 tor 2	Donald E Taylor Sheila M Taylor		Document	Case r	number (if known)	
Part	t 6:	Answer These Questi	ions for Re	eporting Purposes			
16.	Wha	t kind of debts do have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.			
				Yes. Go to line 17.			
			16b.	Are your debts primarily business money for a business or investmen			
				☐ No. Go to line 16c.			
			40-	Yes. Go to line 17.	-1 l l-bl b		
			16c.	State the type of debts you owe that	at are not consumer debts or bi	usiness debts	
17.		you filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.		
Do you estimate that after any exempt property is excluded and			■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?			
		dministrative expenses re paid that funds will		■ No			
	be available for distribution to unsecured creditors?			□ Yes			
18. How many Creditors do you estimate that you		1 -49		1,000-5,000	☐ 25,00°		
	owe		☐ 50-99 ☐ 100-19 ☐ 200-99		☐ 5001-10,000 ☐ 10,001-25,000		1-100,000 than100,000
19.	estin	much do you nate your assets to orth?	1 00,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$1,000 □ \$10,00	000,001 - \$1 billion 0,000,001 - \$10 billion 00,000,001 - \$50 billion than \$50 billion
20.		much do you nate your liabilities ?	1 00,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$1,00 □ \$10,0	000,001 - \$1 billion 0,000,001 - \$10 billion 00,000,001 - \$50 billion than \$50 billion
Part	t 7:	Sign Below					
For	you		I have exa	amined this petition, and I declare u	nder penalty of perjury that the	information provided	is true and correct.
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					help me fill out this	
			I request i	relief in accordance with the chapte	r of title 11, United States Code	e, specified in this per	tition.
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, and 3571.					aud in connection with a 8 U.S.C. §§ 152, 1341, 1519,	
			/s/ Dona Donald I	ld E Taylor E Taylor	/s/ Sheila M Sheila M Ta		
				of Debtor 1	Signature of		
			Executed	on May 11, 2017 MM / DD / YYYY	Executed on	May 11, 2017 MM / DD / YYYY	

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Debtor 1 Donald E Taylor		Document	rage 7 01 50
	Sheila M Taylor		Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ronald D. Cummings	Date	May 11, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Ronald D. Cummings		
Printed name		
Law offices of Ronald D. Cummings Firm name		
22600 Deer Path Lane		
Plainfield, IL 60544		
Number, Street, City, State & ZIP Code		
Contact phone 815 782-4844	Email address	bankruptcylawyer@sbcglobal.net
6195972		
Bar number & State		

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		Docume	ent Page 8 of 56	
Fill in this infor	mation to identify your	case:		
Debtor 1	Donald E Taylor			
	First Name	Middle Name	Last Name	
Debtor 2	Sheila M Taylor			
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	199,900.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	43,450.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	243,350.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	123,822.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,600.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	107,731.40
	Your total liabilities	\$	233,153.40
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,424.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,424.00
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Donald E Taylor
Debtor 2 Sheila M Taylor Ca

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,156.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,600.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	24,078.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,678.00

	Ca	se 17-14757	Doc 1	Filed 05/1		Entered 05/11/1	.7 09:37:3	3 De	sc Main
ill	in this inforn	nation to identify you	r case and t						
Deb	otor 1	Donald E Taylor First Name		le Name		Last Name			
	otor 2 use, if filing)	Sheila M Taylor First Name	Middl	le Name		Last Name			
Jni	ted States Bar	nkruptcy Court for the:	NORTHER	RN DISTRICT (OF ILLING	OIS			
Cas	e number _								☐ Check if this is an amended filing
ea nink	chedule ch category, se it fits best. Be	e as complete and accu e space is needed, attac	ibe items. List rate as possib	le. If two marrie	d people a	asset fits in more than one are filing together, both are top of any additional pages	equally respon	sible for su	pplying correct
Part	1: Describe I	Each Residence, Buildir	ng, Land, or O	ther Real Estate	You Own	or Have an Interest In			
	No. Go to Part	2.	oc merest in		S	and, or similar property?			
1.1	1706 Prair	ie Wind Drive				Check all that apply			
		f available, or other description	on	Duple		ome -unit building or cooperative	the amount of	any secure	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
	Joliet City	IL 60	9435-0000 ZIP Code	Land	factured o	r mobile home	Current value entire proper		Current value of the portion you own? \$199,900.00
				☐ Times ☐ Other Who has an	interest i	n the property? Check one	Describe the	nature of y simple, ten	our ownership interest ancy by the entireties, or
				☐ Debto	or 1 only				
	Will				or 2 only				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$199,900.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debte Debte		Donald E Taylor Sheila M Taylor	Ca	se number (if known)	
3. Ca	rs, vans	, trucks, tractors, sport (utility vehicles, motorcycles		
	No				
_	Yes				
0.4	Malaa	Mazda	When here are interest in the account of a	Do not deduct secured	I claims or exemptions. Put
3.1	Make: Model:	CX9	Who has an interest in the property? Check one Debtor 1 only	the amount of any sec	ured claims on Schedule D: Claims Secured by Property.
	Year:	2008	Debtor 2 only	Creditors Who have C	dains Secured by Property.
		mate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		nformation:	☐ At least one of the debtors and another	chare property.	portion you own:
			Check if this is community property (see instructions)	\$4,500.00	\$4,500.00
3.2	Makai	ford	Who has an interest in the preparty? Object	Do not deduct secured	I claims or exemptions. Put
3.2	Make: Model:	Mustang	Who has an interest in the property? Check one Debtor 1 only		ured claims on Schedule D: Claims Secured by Property.
	Year:	2004	Debtor 2 only	Oreanors who have c	
		mate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		Information:	☐ At least one of the debtors and another	ontillo proporty.	portion you own.
				*=	
			Check if this is community property (see instructions)	\$500.00	\$500.00
			you own for all of your entries from Part 2, including an		\$5,000.00
	_				
		ibe Your Personal and Hou			Command realize of the
ро у	ou own	or nave any legal or equi	itable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E:	kamples: No		e, linens, china, kitchenware		
	Yes. De	escribe			
		furniture	misc property		\$2,000.00
	ectronics xamples:	Televisions and radios; a	udio, video, stereo, and digital equipment; computers, printer meras, media players, games	rs, scanners; music colle	ctions; electronic devices
_	No Yes. De	escribe			
		s of value Antiques and figurines; pa	aintings, prints, or other artwork; books, pictures, or other art abilia, collectibles	objects; stamp, coin, or	baseball card collections;
	No				
	Yes. De	escribe			

Official Form 106A/B Schedule A/B: Property page 2

Case 17-14757 Doc 1 Filed 05/11/17 Entered 05/11/17 09:37:33 Desc Main Page 12 of 56 Document **Donald E Taylor** Debtor 1 Debtor 2 Sheila M Taylor Case number (if known) 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Unknown misc 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes.....

Chase Bank

PNC Bank

Schedule A/B: Property

Official Form 106A/B

checking

17.2. checking

17.1.

page 3

\$25.00

\$1,400.00

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Dobtor 1	Danald E Taylor	Document Page 13 of 56	
Debtor 1 Debtor 2	Donald E Taylor Sheila M Taylor	Case number (if known)	
	17.3.	Financial Plus Credit Union	\$25.00
	s, mutual funds, or publicly traded stoples: Bond funds, investment accounts v	ocks with brokerage firms, money market accounts	
	Institution or	issuer name:	
	ublicly traded stock and interests in i venture	incorporated and unincorporated businesses, including an interest	in an LLC, partnership, and
☐ Yes.	Give specific information about them Name of entity:		
Nego Non-r ■ No	tiable instruments include personal chec	er negotiable and non-negotiable instruments eks, cashiers' checks, promissory notes, and money orders. ennot transfer to someone by signing or delivering them.	
Exam □ No	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 40 List each account separately. Type of account:	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing p	lans
	IRA	PNC	\$35,000.00
Your s Exam ■ No		nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications companion in the linstitution name or individual:	es, or others
■ No	nes (A contract for a periodic payment c	of money to you, either for life or for a number of years)	
☐ Yes.	lssuer name and descrip	otion.	
	sts in an education IRA, in an account .C. §§ 530(b)(1), 529A(b), and 529(b)(1)	in a qualified ABLE program, or under a qualified state tuition prog	gram.
	Institution name and des	scription. Separately file the records of any interests.11 U.S.C. § 521(c):	
■ No		erty (other than anything listed in line 1), and rights or powers exer	cisable for your benefit
	Give specific information about them		
Exam ■ No	,	proceeds from royalties and licensing agreements	
	Give specific information about them		
27. Licens	ses, franchises, and other general inta	angibles	

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you? Current value of the portion you own? Do not deduct secured

Case 17-14757 Doc 1 Filed 05/11/17 Entered 05/11/17 09:37:33 Desc Main Page 14 of 56 Document **Donald E Taylor** Debtor 1 Sheila M Taylor Debtor 2 Case number (if known) claims or exemptions. 28. Tax refunds owed to you ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims □ No Yes. Describe each claim....... Workers Compensation Claim being handled by Goldman, Unknown Weisman & Cairo Back Injury 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

for Part 4. Write that number here.....

No. Go to Part 6.

☐ Yes. Go to line 38.

\$36,450.00

Case 17-14757 Doc 1 Filed 05/11/17 Entered 05/11/17 09:37:33 Desc Main Page 15 of 56 Document **Donald E Taylor** Debtor 1 Debtor 2 Sheila M Taylor Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$199,900.00 Part 2: Total vehicles, line 5 \$5,000.00 Part 3: Total personal and household items, line 15 57. \$2,000.00 Part 4: Total financial assets, line 36 \$36,450.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54

\$0.00

Copy personal property total

\$43,450.00

Official Form 106A/B Schedule A/B: Property page 6

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$43,450.00

\$243,350.00

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		17(7(4)))))		
Fill in this infor	mation to identify your	case:		
Debtor 1	Donald E Taylor			
	First Name	Middle Name	Last Name	
Debtor 2	Sheila M Taylor			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

,, , , , , , , , , , , , , , , , , , , ,	•	• ′		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Check	only one box for each exemption.	
1706 Prairie Wind Drive Joliet, IL 60435 Will County	\$199,900.00	•	\$81,551.00	735 ILCS 5/12-112
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2008 Mazda CX9 Line from Schedule A/B: 3.1	\$4,500.00		\$4,500.00	735 ILCS 5/12-1001(c)
Ellio II Goriodalio 702. G.1			100% of fair market value, up to any applicable statutory limit	
2004 ford Mustang Line from Schedule A/B: 3.2	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Elife from Genedate Av.B. G.2			100% of fair market value, up to any applicable statutory limit	
furniture misc property Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
Zine nom concade / v Zi Ci i			100% of fair market value, up to any applicable statutory limit	
misc Line from Schedule A/B: 11.1	Unknown		100%	735 ILCS 5/12-1001(a)
LING HOLL GOLGGIO FAD. TTT			100% of fair market value, up to any applicable statutory limit	
		6	arry applicable statutory little	

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Sheila M Taylor Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B checking: PNC Bank 735 ILCS 5/12-1001(b) \$1,400.00 \$1,400.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **IRA: PNC** 735 ILCS 5/12-1006 \$35,000.00 \$35,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Workers Compensation Claim being** 820 ILCS 305/21 100% Unknown handled by Goldman, Weisman & Cairo Back Injury 100% of fair market value, up to Line from Schedule A/B: 34.1 any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

	Case 2	17-14757	Doc 1	Filed 05/11/17 Document	Entered Page 18	d 05/11/17 09:3 of 56	7:33 De _	sc Main
Fill in thi	s information	n to identify you	r case:					
Debtor 1		onald E Taylor		dle Name	Last Name			
Debtor 2 (Spouse if, f		neila M Taylor	Mid	dle Name	Last Name			
United St	ates Bankrup	tcy Court for the:	NORTH	ERN DISTRICT OF ILLI	INOIS			
Case nur (if known)	mber						_	Check if this is an amended filing
	Form 10		Who I	lave Claims S	Secured	by Property		12/15
s needed,	e as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space space speed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case umber (if known).							
	Do any creditors have claims secured by your property?							
□ No	o. Check this I	pox and submit the	nis form to the	ne court with your other	schedules. Yo	u have nothing else to	report on this f	orm.
■ Ye	es. Fill in all of	the information I	pelow.					
Part 1:	List All Sec	ured Claims						
		more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		in Part 2. As	Amount of claim Do not deduct the	Value of collate that supports the claim		
	gions Morto	gage	Describe th	e property that secures the	he claim:	\$123,822.00	Unkno	own \$123,822.00
	itor's Name nkruptcy			ate Mortgage				
Po	Box 18001	_	As of the d apply.	ate you file, the claim is: (Check all that			
Hat	ttiesburg, N	IS 39404	Continge	ent				
Num	ber, Street, City, S	State & Zip Code	Unliquid					
Who owe	s the debt? C	heck one	Disputed					
□ Debtor □ Debtor	1 only	rieck one.	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)					
_	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)					
_		otors and another	☐ Judgme	nt lien from a lawsuit				
	if this claim re nunity debt	elates to a	Other (in	ncluding a right to offset) _				
		Opened 11/09 Last Active			7070			
Date debt	was incurred	2/28/17	Last	4 digits of account numb	_{er} 7870			

Add the dollar value of your entries in Column A on this page. Write that number here: \$123,822.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$123,822.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Document Page 19 of 56 Fill in this information to identify your case: Debtor 1 **Donald E Taylor** Middle Name Last Name First Name Debtor 2 Sheila M Taylor Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$1.600.00 \$1.600.00 \$0.00 Priority Creditor's Name P.O. Box 21126 When was the debt incurred? Philadelphia, PA 19114 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ☐ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ■ Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes **2015 taxes** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Part 2.

Total claim

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Debtor 1 Donald E Taylor

Debto	or 2 Sheila M Taylor	Case number (if know)	
4.1	Athletic and Therapeutic Inst. Nonpriority Creditor's Name	Last 4 digits of account number 0288	\$663.75
	P.O. Box 371863 Pittsburgh, PA 15250-7863	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Athletico Ltd	Last 4 digits of account number 6201	\$76.61
J	Nonpriority Creditor's Name	<u> </u>	
	Attn Collections Dept 709 Enterprise Drive	When was the debt incurred?	
	Oak Brook, IL 60523 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Oneon all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	ATI Physical Therapy	Last 4 digits of account number 0153	\$204.28
	Nonpriority Creditor's Name Attn: Collections	When was the debt incurred?	
	P.O. Box 371863		
	Pittsburgh, PA 15250 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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	Donald E Taylor Sheila M Taylor		Case number (if know)	
4.4	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	8986	\$7,206.00
	100 S West St Wilmington, DE 19801	When was the debt incurred?	Opened 10/11 Last Active 1/20/17	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.5	Chase Card	Last 4 digits of account number	5591	\$6,830.00
	Nonpriority Creditor's Name Attn: Correspondence Po Box 15298 Wilmington, DE 10850	When was the debt incurred?	Opened 08/07 Last Active 2/23/17	
	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	□ Yes	Other. Specify Credit Card		
4.6	Chase Card	Last 4 digits of account number	9938	\$6,817.00
	Nonpriority Creditor's Name Attn: Correspondence Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/03 Last Active 1/08/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	I	

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Debtor 1 Donald E Taylor

Debte	or 2 Sheila M Taylor		Case number (if know)	
4.7	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	0630	\$5,923.00
	Attn: Correspondence Po Box 15298	When was the debt incurred?	Opened 03/10 Last Active 2/15/17	
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim i	s. Check all that apply	
	Who incurred the debt? Check one.	7.5 or the date you me, the claim.	o. Oncok an mat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.8	Chase Card	Last 4 digits of account number	6315	\$896.00
	Nonpriority Creditor's Name Attn: Correspondence Po Box 15298 Wilmington DE 10850	When was the debt incurred?	Opened 02/06 Last Active 3/02/17	
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Citibank North America	Last 4 digits of account number	4894	\$3,796.00
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup Po Box 790040	When was the debt incurred?	Opened 11/11 Last Active 2/28/17	
	Saint Louis, MO 63179 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	

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Debto Debto	r 1 Donald E Taylor r 2 Sheila M Taylor		Case number (if know)	
4.1	Citibank/Sears	Last 4 digits of account number	3105	\$920.00
	Nonpriority Creditor's Name Citicorp Credit Services/Attn: Centraliz Po Bopx 790040 Saint Louis, MO 63179 Number Street City Stee 7th Code	When was the debt incurred?	Opened 09/98 Last Active 3/11/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан тлат арріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citicards Cbna	Last 4 digits of account number	7722	\$17,736.00
	Nonpriority Creditor's Name Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 04/00 Last Active 1/07/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	4716	\$2,676.00
	Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/11 Last Active 3/07/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	· ·	
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other. Specify Credit Card	İ	

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Debtor Debtor	1 Donald E Taylor 2 Sheila M Taylor		Case number (if know)		
4.1	Comenity Bank/PacSun	Last 4 digits of account number	7423	\$102.00	
	Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 09/13 Last Active 2/15/17		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Charge Acc			
4.1	Comenity Bank/Victoria Secret	Last 4 digits of account number	7306	\$537.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 04/14 Last Active 3/07/17		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims			
	■ No	Debts to pension or profit-sharin			
	Yes	Other. Specify Charge Acc	count		
4.1 5	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	8614	\$12,882.00	
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 10/02 Last Active 3/02/17		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharin	• •		
	Yes	Other. Specify Credit Card	l		

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Debtor Debtor	Donald E Taylor Sheila M Taylor		Case number (if know)					
4.1 6	EdFinancial Services, LIc	Last 4 digits of account number	9324	\$24,078.00				
	Nonpriority Creditor's Name 298 North Seven Oaks Dr Knoxville, TN 37922	When was the debt incurred?	Opened 08/16 Last Active 2/28/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify						
		Educationa	al					
4.1 7	Financial Plus Cu Nonpriority Creditor's Name	Last 4 digits of account number	1510	\$8,466.00				
	800 Chestnut St Ottawa, IL 61350	When was the debt incurred?	Opened 02/16 Last Active 2/23/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Unsecured						
4.1	Financial Plus Cu Nonpriority Creditor's Name	Last 4 digits of account number	1570	\$3,412.00				
	800 Chestnut St Ottawa, IL 61350	When was the debt incurred?	Opened 10/89 Last Active 2/23/17					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	■ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	No	☐ Debts to pension or profit-sharing						
	☐ Yes	■ Other. Specify Credit Card	i					

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Debto:	r 1 Donald E Taylor r 2 Sheila M Taylor		Case number (if know)			
4.1	First National Bank	Last 4 digits of account number	3486	\$467.00		
	Nonpriority Creditor's Name Attn: FNN Legal Dept 1620 Dodge St Mailstop Code 3290 Omaha, NE 68191	When was the debt incurred?	Opened 09/07 Last Active 3/07/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card	,			
4.2	Kohls/Capital One	Last 4 digits of account number	4346	\$803.00		
	Nonpriority Creditor's Name Kohls Credit Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 03/99 Last Active 3/07/17			
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin				
	Yes	■ Other. Specify Charge Acc				
4.2	Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1279	\$421.00		
	Kohls Credit Po Box 3043 Milwaukee, WI 53201	When was the debt incurred?	Opened 05/05 Last Active 3/07/17			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	□ Yes	■ Other Specify Charge Acc	count			

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Sheila M Taylor	Case number (if know)					
Merchants Credit	Last 4 digits of account number	0062	\$814.			
Nonpriority Creditor's Name 223 W Jackson Blvd	When was the debt incurred?	Opened 10/15				
Ste 700 Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim	ie: Chock all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арргу				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
No	Debts to pension or profit-sharing	ng plans, and other similar debts				
Yes	■ Other. Specify Collection	Attorney Edward Hospital				
Merchants Credit	Last 4 digits of account number	0080	\$189			
Nonpriority Creditor's Name 223 W Jackson Blvd	When was the debt incurred?	Opened 07/13	, , , , ,			
Ste 700 Chicago, IL 60606 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
☐ Yes	Other. Specify Collection At Rush L	Attorney Midwest Orthopaedics				
Merchants Credit Guide Co.		0908	\$329			
Nonpriority Creditor's Name 223 West Jackson Blvd #700	Last 4 digits of account number When was the debt incurred?		ΨΟΣΟ			
Chicago, IL 60606	_					
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one. ☐ Debtor 1 only	П					
Debtor 2 only	Contingent					
_	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
At least one of the debtors and another	Student loans	u viuiiii.				
☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	aration agreement or divorce that you did not				
■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts				
☐ Yes	Other Specific					
⊔ Yes	Other. Specify					

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Debtor 1 Debtor 2	Donald E Taylor Sheila M Taylor	Document 1 age 20	Case number (if know)	
4.2	Miramed Revenue Group LLC	Last 4 digits of account number	0116	\$718.40
	Nonpriority Creditor's Name Dept 77304 P.O. Box 77000	When was the debt incurred?		
1	Detroit, MI 48277-0304 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
]]	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans		
I	lebt s the claim subject to offset? 	report as priority claims	ration agreement or divorce that you did not	
_	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	
10 1	Miramed Revenue Group LLC	Last 4 digits of account number	1453	\$21.54
[F	Nonpriority Creditor's Name Dept 77304 P.O. Box 77000 Detroit, MI 48277-0304	When was the debt incurred?		
\ \	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
_	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
c	☐ Check if this claim is for a community lebt s the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	Debts to pension or profit-sharin	g plans, and other similar debts	
	1 165	Other. Specify		
1 '	Molecular Imaging Nonpriority Creditor's Name	Last 4 digits of account number	1159	\$325.39
(28489 Network Place Chicago, IL 60673-1287	When was the debt incurred?	Oh od odlada da onah	
V	Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim i	s: Спеск ан тлат арргу	
_	Debtor 2 only	☐ Contingent☐ Unliquidated		
_	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
[☐ Check if this claim is for a community lebt s the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
_	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify	g plans, and other similar debts	

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Debtor	2 Sheila M Taylor		Case number (if know)				
4.2	Transported Contains Inc.			¢57.20			
8	Transworld Systems Inc. Nonpriority Creditor's Name	Last 4 digits of account number	·	\$57.38			
	500 Virginia Drive #514	When was the debt incurred?					
	Fort Washington, PA 19034 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	,					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
		_ '					
	Debtor 1 and Debtor 2 only	Disputed	ad alatas				
	At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not				
	_	Debts to pension or profit-shar	ing plane, and other similar debte				
	No		ing plans, and other similar debts				
	Yes	Other. Specify ATI					
4.2	Visa Dept Store National						
9	Bank/Macy's Nonpriority Creditor's Name	Last 4 digits of account number	6893	\$364.00			
	Attn: Bankruptcy		Opened 06/06 Last Active				
	Po Box 8053	When was the debt incurred?	2/14/17				
	Mason, OH 45040 Number Street City State Zlp Code	As of the data you file the elaim	ic. Charle all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim	ть. Спеск ан тат арргу				
	Debtor 1 only	-					
		Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		paration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-shar					
	Yes	Other. Specify Charge Ac	arge Account				
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed					
is tryi have	nis page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts the ed for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor nat you listed in Parts 1 or 2, list the add	in Parts 1 or 2, then list the collection agency	here. Similarly, if you			
	nd Address	On which entry in Part 1 or Part 2 did yo	•				
	hysical Therapy Collections		Part 1: Creditors with Priority Unsecured Clain				
	30x 371863		Part 2: Creditors with Nonpriority Unsecured	Claims			
_	urgh, PA 15250	Last 4 digits of account number					
Nomo	nd Address	On which entry in Part 1 or Part 2 did yo	us list the original graditor?				
	world Systems Inc.	4.0	\square Part 1: Creditors with Priority Unsecured Clair	ms			
	irginia Drive #514	` ′	Part 2: Creditors with Nonpriority Unsecured				
Fort V	Vashington, PA 19034	Last 4 digits of account number	— Tart 2. Orealions with Nonphority Griscoured	Olamo			
Part 4:	Add the Amounts for Each Type of U	Jnsecured Claim					
6. Total	the amounts of certain types of unsecured clof unsecured claim.		reporting purposes only. 28 U.S.C. §159. Add	the amounts for each			
-, 60 (Total Claim				
	6a. Domestic support obligation	ns	6a. \$ 0.00				
	22solid dapport dbilgation	-	σ.00	-			

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Debtor 1 **Donald E Taylor** Debtor 2 **Sheila M Taylor**

Case number (if know)

	,a	- uyioi		(,	
Total claims					
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,600.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,600.00
				Tota	I Claim
Total	6f.	Student loans	6f.	\$	24,078.00
claims om Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	83,653.40
		Total Nonpriority. Add lines 6f through 6i.	6j.	\$	107,731.40

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		DOGUILLE	III Paue 31 01 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Donald E Taylor			
	First Name	Middle Name	Last Name	
Debtor 2	Sheila M Taylor			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				- 0
(if known)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	City		Oldio	Zii Oodo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nt Page 32 o	of 56
Fill in this in	formation to identify your	case:		
Debtor 1	Donald E Taylor			
DODIOI 1	First Name	Middle Name	Last Name	
Debtor 2	Sheila M Taylor			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number	•			
(if known)	· -			☐ Check if this is an
				amended filing
Schedu Codebtors ar Deople are fil	ing together, both are equ	re also liable for any deb ally responsible for supp	lying correct informa	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page,
	number the entries in the nd case number (if known)			to this page. On the top of any Additional Pages, write
1. Do yo	u have any codebtors? (If	you are filing a joint case, o	do not list either spouse	e as a codebtor.
■ No				
☐ Yes				
	the last 8 years, have you California, Idaho, Louisiana,			ry? (Community property states and territories include ington, and Wisconsin.)
	o to line 3.			
☐ Yes. □	Did your spouse, former spou	use, or legal equivalent live	with you at the time?	
in line 2 Form 10 out Colu	again as a codebtor only i 6D), Schedule E/F (Official Imn 2.	f that person is a guaran	tor or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 06G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Jumn 1: Your codebtor ne, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
Nar	me			☐ Schedule E/F, line
				☐ Schedule G, line
Nur City	mber Street	State	ZIP Code	
3.2				☐ Schedule D, line
Nar	me			☐ Schedule E/F, line
				☐ Schedule G, line
Nur City	mber Street	State	ZIP Code	

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Eill	in this information to ider	otify your o	aco:				ı				
		nald E Ta									
	btor 2 She	eila M Tay	rlor			_					
Uni	ited States Bankruptcy C	ourt for the	NORTHERN DISTRIC	CT OF ILLINOIS							
	se number			-		_		if this is:			
`							□ A		ent showing	postpetition cl	hapter
0	fficial Form 10	<u>6l</u>					MI	M / DD/ Y	YYY		
S	chedule I: You	ur Inco	ome								12/15
sup spo atta	as complete and accura plying correct informat use. If you are separate ch a separate sheet to to the control of the control o	ion. If you ed and you this form. (are married and not filing w	ng jointly, and your sith you, do not include	spouse de infor	is liv matic	ing with y on about	you, inclu your spo	ude inform ouse. If mo	ation about yere space is ne	our eeded,
1.	Fill in your employment information.			Debtor 1				Debtor 2	or non-fili	ing spouse	
	If you have more than one job,	ou have more than one job,		■ Employed				☐ Emplo	yed		
	attach a separate page information about addit		Employment status	☐ Not employed				■ Not employed			
	employers.		Occupation	Cabinet maker							
	Include part-time, seas self-employed work.	onal, or	Employer's name	Pyramid custom	n Cabir	ets					
	Occupation may includ or homemaker, if it app		Employer's address	Lockport, IL 604	141						
			How long employed t								
-	Ohra Batalla	A la a sad B.A. a sa	• • •					_			
	Give Details										
	mate monthly income a use unless you are separ		ate you file this form. If	you have nothing to re	eport for	any l	ine, write	\$0 in the	space. Incl	ude your non-f	filing
	ou or your non-filing spouse e space, attach a separa			ombine the information	n for all	emplo	yers for t	hat perso	n on the lin	es below. If yo	u need
							For Deb	tor 1	For Deb	tor 2 or ig spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$	2,	426.67	\$	0.00	
3.	Estimate and list mor	nthly overti	me pav.		3.	+\$		0.00	+\$	0.00	

2,426.67

0.00

Calculate gross Income. Add line 2 + line 3.

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	tor 1 tor 2	Donald E Taylor Sheila M Taylor	-		Case	e number (<i>if kr</i>	nown	_				
					Fo	r Debtor 1			For Debto			
	Cop	y line 4 here	4.		\$_	2,426	6.67	_	\$		0.00	-
5.	List	all payroll deductions:										
-	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	294	1 67	ę	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b		\$).OC	_	\$ 		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$		0.00		\$		0.00	-
	5d.	Required repayments of retirement fund loans	50		\$		0.00	_	\$		0.00	-
	5e.	Insurance	5e	€.	\$		0.00		\$	-	0.00	_
	5f.	Domestic support obligations	5f.		\$	(0.00	_ (\$		0.00	-
	5g.	Union dues	50	g.	\$	(0.00	- :	\$		0.00	-
	5h.	Other deductions. Specify:	5h	า.+	\$	C	0.00	+ 5	\$		0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	294	1.67	_ {	\$		0.00	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,132	2.00	_	\$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			_	·		-				-
		monthly net income.	88		\$_		0.00	_ '	\$		0.00	_
	8b.	Interest and dividends	8b	ο.	\$_	(0.00	_	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_		0.00	_	\$		0.00	-
	8d.	Unemployment compensation	80		\$_		0.00	- :		2,29	92.00	-
	8e.	Social Security	86	€.	\$_	(0.00	_	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_		0.00		\$		0.00	_
	8g.	Pension or retirement income	80	_	\$_		0.00	_	\$		0.00	=
	8h.	Other monthly income. Specify:	_ 8h	า.+	\$_		0.00	_ + \$	\$		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(0.00		\$	2,2	292.00	D
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,132.00	+		2,292.0	_ =	\$	4,424.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť-		2,102.00			2,202.0		_	4,424.00
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•		•	in <i>Sched</i>		'. • \$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies								·. (ß	4,424.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							_	ombir	ned y income
		No. Yes. Explain:										
		1 03. Expidit.										

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						1				
H	in this informa	ition to identify yo	ur case:							
Deb	ebtor 1 Donald E Taylor						neck i			
Deb	otor 2	Sheila M Tay	ılor					n amended filing supplement show	ving postpetition chapter	
(Spo	ouse, if filing)	Official William	101			_			the following date:	
Unit	ted States Bankı	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	OIS		M	M / DD / YYYY		
Cas	se number									
(If k	nown)									
0	fficial Fo	orm 106J				•				
		J: Your I	 Exper	ises					12/	1
Be info	as complete ormation. If m	and accurate as	possible.	. If two married people and change in the change is the change in the change is the change in the change in the change in the change in the change is the change in the ch					or supplying correct	_
Par		ribe Your House	hold							_
1.	Is this a joir ☐ No. Go to									
	_	s Debtor 2 live i	n a separ	ate household?						
	. 33. 3 €									
		-	t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent		Dependent's relationship to Debtor 1 or Debtor 2			Does dependent live with you?	
	Do not state	Do not state the							□ No	
	dependents	names.			Daughter			<u>17</u>	■ Yes □ No	
					Son			18	■ Yes	
									□ No	
									☐ Yes ☐ No	
									☐ Yes	
3.		oenses include f people other th	han I	No						
		d your depender		Yes						
Est	timate your ex	ate Your Ongoir openses as of your address as a second to the second to	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followers	orm as a s e <i>J</i> , check	supp the l	lement in a Cha box at the top o	apter 13 case to report f the form and fill in the	-
				government assistance i						
	value of sucl ficial Form 10		d have inc	cluded it on <i>Schedule I:</i> Y	Your Income	- 1	_	Your exp	enses	
4.		or home ownersl and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$_		1,199.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		rty, homeowner's				4b.			0.00	
		maintenance, re owner's associati		ıpkeep expenses dominium dues		4c. 4d.	_		100.00 0.00	
5.				our residence, such as ho	me equity loans		\$ -		0.00	

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Case number (if known)	
6a. \$	315.00
6b. \$	120.00
ole services 6c. \$	560.00
6d. \$	0.00
7. \$	800.00
8. \$	0.00
9. \$	100.00
10. \$	200.00
11. \$	140.00
n fare. 12. \$	450.00
azines, and books	20.00
<u> </u>	50.00
· 	
cluded in lines 4 or 20.	
15a. \$	0.00
15b. \$	0.00
15c. \$	300.00
15d. \$	0.00
included in lines 4 or 20.	
16. \$	0.00
173 \$	0.00
·	0.00
·	0.00
	0.00
·	0.00
	0.00
	0.00
19.	
or 5 of this form or on Schedule I: Your Income.	
20a. \$	0.00
20b. \$	0.00
20c. \$	0.00
20d. \$	0.00
20e. \$	0.00
21. +\$	70.00
\$	4,424.00
ny, from Official Form 106J-2	
expenses. \$	4,424.00
om Schedule I. 23a. \$	4,424.00
	4,424.00
nly income.	0.00
200. _[Ψ	0.00
enses within the year after you file this form? ithin the year or do you expect your mortgage payment to increas	se or decrease because of a
	se or decrease because of a
	Section Sect

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Fill in this infori	mation to identify your	case:			
Debtor 1	Donald E Taylor				
5 1 5	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Sheila M Taylor First Name	Middle Name	Last Name		
(Spouse II, IIIIIg)	Filst Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
f two married pe You must file thi	eople are filing togethe	n connection with a bankr	sible for supplying corre		
Sign	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorn	ey to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				Petition Preparer's Notice, gnature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sumn	nary and schedules filed	d with this declaration and	
X /s/ Dor	nald E Taylor		X /s/ Sheila M	i Taylor	
Donald	d E Taylor		Sheila M Ta	aylor	
Signatu	re of Debtor 1		Signature of D	Debtor 2	
Date _I	May 11, 2017		Date _ May ·	11, 2017	

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Fill in	this informa	ation to identify you	case:			
Debtor	· 1	Donald E Taylor				
		First Name	Middle Name	Last Name		
Debtor (Spouse		Sheila M Taylor First Name	Middle Name	Last Name		
			NODTHEDNI DISTRICT			
United	States Ban	cruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case r	number				_	check if this is an mended filing
State		of Financial		duals Filing for B		4/16
informa numbe	ation. If mo r (if known)	re space is needed, . Answer every ques	attach a separate sheet to stion.	are filing together, both are this form. On the top of any		
Part 1:			rital Status and Where Yo	u Lived Before		
1. W	hat is your	current marital statu	s?			
	Married Not marri	ed				
2. Dı	ring the las	st 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. List	all of the places you li	ived in the last 3 years. Do r	not include where you live now		
D	ebtor 1 Prid	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
				gal equivalent in a communi evada, New Mexico, Puerto Ri		
	No					
	Yes. Mak	e sure you fill out Sch	nedule H: Your Codebtors (C	Official Form 106H).		
Part 2	Evnlain	the Sources of You	r Income			
I all Z	Lxpiaiii	the Sources of Tou	i ilicollie			
Fil	I in the total	amount of income yo	u received from all jobs and	ng a business during this ye all businesses, including part- ve together, list it only once un	ime activities.	ndar years?
Fil	I in the total ou are filing	amount of income yo	u received from all jobs and	all businesses, including part-	ime activities.	ndar years?
Fil If y	I in the total you are filing No	amount of income yo	u received from all jobs and	all businesses, including part-	ime activities.	ndar years?
Fil If y	I in the total you are filing No	amount of income yo a joint case and you	u received from all jobs and have income that you receive	all businesses, including part-	ime activities. der Debtor 1.	ndar years?
Fil If y	I in the total you are filing No	amount of income yo a joint case and you	u received from all jobs and	all businesses, including part-	ime activities.	Gross income (before deductions and exclusions)
Fill If y	I in the total you are filing No Yes. Fill i	amount of income yo a joint case and you	received from all jobs and have income that you received. Debtor 1 Sources of income	all businesses, including part- ve together, list it only once un Gross income (before deductions and	ime activities. der Debtor 1. Debtor 2 Sources of income	Gross income (before deductions

Official Form 107

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Donald E Taylor Debtor 1 Sheila M Taylor Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$65,783.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$103,298.00 \$0.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Amount you Dates of payment **Total amount** Was this payment for ...

still owe

paid

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Deb Deb	tor 1 tor 2	Donald E Taylor Sheila M Taylor		Document	Cas	se number (i	f known)		
	<i>Inside</i> of whi	in 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners contr	s; relatives of any ger ol, or owner of 20% of	neral partners; partners partners or more of their votin	erships of w g securities;	hich you and an	ı are a genera y managing a	al partner; corporation gent, including one fo
	— 1	No							
		Yes. List all payments to an insider.							
	Insic	der's Name and Address	Dat	tes of payment	Total amount paid	Amount still	you owe	Reason for	this payment
	insid	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos			ments or transfer a	any propert	y on ac	count of a de	ebt that benefited an
		No							
		Yes. List all payments to an insider							
	Insid	der's Name and Address	Dat	tes of payment	Total amount paid	Amount still	you owe	Reason for Include cred	this payment itor's name
Part	4:	Identify Legal Actions, Repossession	ns, an	nd Foreclosures					
	List al modif	in 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.							
		e title e number	Nat	ture of the case	Court or agency	,		Status of th	e case
	Checl	in 1 year before you filed for bankrupt k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		as any of your prop	erty repossessed, t	foreclosed,	garnisł	ned, attached	I, seized, or levied?
	Cred	litor Name and Address	Des	scribe the Property			Date		Value of the property
			Ex	plain what happene	d				,
	accoi	in 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.			luding a bank or fi	nancial inst	itution,	set off any a	mounts from your
	Cred	litor Name and Address	Des	scribe the action the	e creditor took		Date a	ction was	Amount
		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a			erty in the possess	ion of an a		for the bene	efit of creditors, a
		No							
		Yes							
Part	5:	List Certain Gifts and Contributions							
	= 1	n 2 years before you filed for bankrup	tcy, c	did you give any gift	s with a total value	of more th	an \$600	per person?	?
	Gifts	Yes. Fill in the details for each gift. s with a total value of more than \$600		Describe the gifts				you gave	Value
	Pers	person son to Whom You Gave the Gift and ress:					the gif	its	

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Donald E Taylor
Shella M Taylor

Case number (if known)

Deb	btor 2 Sheila M Taylor			Case number	(if known)		
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value	
Par	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,	
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lost the amount that insurance has paid. Lost claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost	
Par	rt 7: List Certain Payments or Transfer	s					
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition process. No Yes. Fill in the details.	prepari	ng a bankruptcy petition?			rty to anyone you	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ ou	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment	
	Law offices of Ronald D. Cumming 22600 Deer Path Lane Plainfield, IL 60544 bankruptcylawyer@sbcglobal.net	S	Attorney Fees			\$1,095.00	
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	r to make payments to your creditor		or transfer any prope	rty to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have all No	ur busin s made :	ess or financial affairs? as security (such as the granting of a se				
	Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made	
	Person's relationship to you				-		

Debtor 1

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Debtor 1 Donald E Taylor Debtor 2 Sheila M Taylor

Case number (if known)

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details.		ny property to a	a self-settle	d trust or similar device o	f which you are a
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Pai	tt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposi	it Boxes, and S	torage Unit	ts	maue
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated.	other financial accou	nts; certificate:	s of deposi		
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed fo	r bankruptcy, a	ny safe de	posit box or other deposit	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than you	r home within 1	l year befo	re you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Incl	ude any prope	rty you bor	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Pai	tt 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surfac	e water, groun			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	s defined under any		law, wheth	er you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardous	s waste, ha	zardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Donald E Taylor Sheila M Taylor

Case number (if known)

24.	_	tified you that you	ı may be liable or potentially liable	e unde	er or in violation of an environme	ental law?		
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State	e and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
25.	Have you notified any government	mental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State	e and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice		
26.	Have you been a party in any	judicial or adminis	strative proceeding under any env	rironm	ental law? Include settlements a	and orders.		
	■ No □ Yes. Fill in the details.							
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ire of the case	Status of the case		
Par	t 11: Give Details About Your	Business or Coni	nections to Any Business					
27.	Within 4 years before you filed	l for bankruptcy, c	did you own a business or have a	ny of t	he following connections to any	business?		
	☐ A sole proprietor or se	elf-employed in a t	rade, profession, or other activity	, eithe	r full-time or part-time			
	☐ A member of a limited	r of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partners	☐ A partner in a partnership						
	☐ An officer, director, or	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
	_		ne details below for each busines	s.				
	Business Name		scribe the nature of the business		Employer Identification number			
	Address (Number, Street, City, State and ZIP Co	de) Nai	me of accountant or bookkeeper		Do not include Social Security in Dates business existed	number or ITIN.		
28.		lithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial astitutions, creditors, or other parties.						
	■ No □ Yes. Fill in the details below	ow.						
	Name Address (Number, Street, City, State and ZIP Co		te Issued					

Entered 05/11/17 09:37:33 Case 17-14757 Doc 1 Filed 05/11/17 Desc Main Document Page 44 of 56 **Donald E Taylor** Debtor 1 Debtor 2 Sheila M Taylor Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donald E Taylor /s/ Sheila M Taylor Donald E Taylor Sheila M Taylor Signature of Debtor 1 Signature of Debtor 2 Date May 11, 2017 Date May 11, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	Fill in this information to identify your case:					
Debtor 1	Donald E Taylor					
	First Name	Middle Name	Last Name			
Debtor 2	Sheila M Taylor					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number				☐ Check if this is an amended filing		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Donald E Taylor Sheila M Taylor	Case number (if known)	
name:		Retain the property and redeem it.	☐ Yes
Descri	otion of	☐ Retain the property and enter into a Reaffirmation Agreement.	
proper		Retain the property and [explain]:	
securir	ng debt:		_
Part 2:	List Your Unexpired Personal Property	v Leases	
For any u in the info	nexpired personal property lease that y ormation below. Do not list real estate le	ou listed in Schedule G: Executory Contracts and Unexpire eases. Unexpired leases are leases that are still in effect; the	e lease period has not yet ended.
You may	assume an unexpired personal property	y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	2).
Describe	your unexpired personal property leas	es	Will the lease be assumed?
Lessor's			□ No
	on of leased		_
Property:			☐ Yes
Lessor's			□ No
Description Property:	on of leased		
Floperty.			☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
1			
Lessor's Description	name: on of leased		□ No
Property:			☐ Yes
Lessor's			□ No
Description Property:	on of leased		☐ Yes
r roporty.			□ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		
Floperty.			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have ind that is subject to an unexpired lease.	licated my intention about any property of my estate that se	cures a debt and any personal
	Donald E Taylor	χ /s/ Sheila M Taylor	
Dor	nald E Taylor	Sheila M Taylor	
Sigr	ature of Debtor 1	Signature of Debtor 2	
Date	May 11, 2017	Date May 11, 2017	

Official Form 108

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-14757 Doc 1 Filed 05/11/17 Entered 05/11/17 09:37:33 Desc Main Document Page 51 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	re	Donald E Taylor Sheila M Taylor			Case No.				
111	-	Silella W Taylor		Debtor(s)	Chapter	7			
		DICCLOCUDE A	OE COMBENSATI			DTOD(C)			
		DISCLOSURE	OF COMPENSATION	ON OF ATTO	KNEY FOR DE	BIOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
		For legal services, I have agreed t	o accept		\$	1,095.00			
		Prior to the filing of this statemen	t I have received		\$	1,095.00			
		Balance Due			\$	0.00			
2.	\$	335.00 of the filing fee has bee	n paid.						
3.	The	e source of the compensation paid to	o me was:						
		■ Debtor □ Other (spec	cify):						
4.	The	e source of compensation to be paid	to me is:						
		■ Debtor □ Other (spe	cify):						
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm								
		☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.							
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	b. c.	Analysis of the debtor's financial si Preparation and filing of any petitic Representation of the debtor at the [Other provisions as needed] Negotiations with secure reaffirmation agreements 522(f)(2)(A) for avoidance	on, schedules, statement of a meeting of creditors and con ed creditors to reduce to a and applications as ne	offairs and plan which infirmation hearing, a infarmation market value; ex infarmation which infarmation with the market infarmation which infarmation which infarmation which infarmation which infarmation which infarmation hearing which infarmation hearing which infarmation hearing, a infarmation	n may be required; nd any adjourned hea emption planning;	rings thereof;	ng of		
7.	Ву	agreement with the debtor(s), the a Representation of the de			g service:				
			CERT	IFICATION					
thi		rtify that the foregoing is a comple cruptcy proceeding.	te statement of any agreeme	nt or arrangement fo	r payment to me for re	epresentation of the debt	or(s) in		
	May	11, 2017		/s/ Ronald D. Cui	nmings				
	Date			Ronald D. Cumm Signature of Attorna					
				Law offices of Ro	onald D. Cumming	s			
				22600 Deer Path					
				Plainfield, IL 605 815 782-4844 Fa					
					er@sbcglobal.net				
				Name of law firm			_		

United States Bankruptcy Court Northern District of Illinois

In re	Sheila M Taylor		Case No.				
		Debtor(s)	Chapter	7			
	VERIFICATION OF CREDITOR MATRIX						
		Number of	Number of Creditors:				
	The above-named Debtor (our) knowledge.	(s) hereby verifies that the list of credi	tors is true and	correct to the best of my			
Date:	May 11, 2017	/s/ Donald E Taylor					
		Donald E Taylor Signature of Debtor					
Date:	May 11, 2017	/s/ Sheila M Taylor					
		Sheila M Taylor					
		Signature of Debtor					

Athletic and Therapeutic Inst. P.O. Box 371863 Pittsburgh, PA 15250-7863

Athletico Ltd Attn Collections Dept 709 Enterprise Drive Oak Brook, IL 60523

ATI Physical Therapy Attn: Collections P.O. Box 371863 Pittsburgh, PA 15250

ATI Physical Therapy Attn: Collections P.O. Box 371863 Pittsburgh, PA 15250

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850

Chase Card Attn: Correspondence Po Box 15298 Wilmington, DE 19850 Citibank North America Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

Citibank/Sears Citicorp Credit Services/Attn: Centraliz Po Bopx 790040 Saint Louis, MO 63179

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Citicards Cbna Po Box 6241 Sioux Falls, SD 57117

Comenity Bank/PacSun Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Discover Financial Po Box 3025 New Albany, OH 43054

EdFinancial Services, Llc 298 North Seven Oaks Dr Knoxville, TN 37922

Financial Plus Cu 800 Chestnut St Ottawa, IL 61350

Financial Plus Cu 800 Chestnut St Ottawa, IL 61350 First National Bank Attn: FNN Legal Dept 1620 Dodge St Mailstop Code 3290 Omaha, NE 68191

Internal Revenue Service P.O. Box 21126 Philadelphia, PA 19114

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit Guide Co. 223 West Jackson Blvd #700 Chicago, IL 60606

Miramed Revenue Group LLC Dept 77304 P.O. Box 77000 Detroit, MI 48277-0304

Miramed Revenue Group LLC Dept 77304 P.O. Box 77000 Detroit, MI 48277-0304

Molecular Imaging 28489 Network Place Chicago, IL 60673-1287

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Regions Mortgage Bankruptcy Po Box 18001 Hattiesburg, MS 39404

Transworld Systems Inc. 500 Virginia Drive #514 Fort Washington, PA 19034

Transworld Systems Inc. 500 Virginia Drive #514 Fort Washington, PA 19034

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040